DECLARATION AND POWER OF ATTORNEY

is a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below at 201 et seq. underneath my name.

I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 et seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled METHOD AND APPARATUS

FOR ACCESSING ELECTRONIC DATA VIA A FAMILIAR PRINTED MEDIUM, specification of which:

is attached hereto

U was filed on April 4, 1996 as Application Serial No. 08/268,246

(for declaration not accompanying application)

with amendment(s) filed

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119/§172 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

EARLIEST FOREIGN APPLIC	ATION(S), IF ANY, FILED PRI	OR TO THE FILING DATE OF T	HE APPLICATION	
APPLICATION NUMBER	COUNTRY	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 U.S.C. 119/172	
,			YES [] NO []	
			YES D NO D	
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			YES O NO O	

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

APPLICATION SERIAL NO.	FILING DATE	STATUS		
		PATENTED	PENDING	ABANDONED
Ser. No. 08/250,799	May 25, 1994		XXX	

POWER OF ATTORNEY: As a named inventor, I hereby appoint John F. Ward (Reg. No. 33,811) and John W. Olivo, Jr. (Reg. No. 35,634), whose address is Ward & Olivo, 708 Third Avenue, New York, New York 10017, and each of them, my attorneys, to prosecute this application, and to transact all business in the Patent and Trademark Office connected therewith.

SEND CORRESPONDENCE TO: DIRECT TELEPHONE CALLS TO: WARD & OLIVO 708 THIRD AVENUE WARD & OLIVO NEW YORK, NEW YORK 10017 (212) 697-6262 LAST NAME PURST NAME MEDIOLE NAME **FULL NAME RATHUS** SPENCER OF INVENTOR 2 CTTY STATE OR POSEON COUNTRY COUNTRY OF CITIZENEHIP RESIDENCE & Û UNITED STATES OF AMERICA SHORT HILLS **NEW JERSEY** CITIZENSHIP POST OFFICE 31 KNOLLWOOD ROAD SHORT HILLS **NEW JERSEY** 07078 **ADDRESS** LAST NAME FIRST NAME MIDDLE NAME **FULL NAME NEVID JEFFREY** S. OF INVENTOR 2 STATE OR POREIGN COUNTRY COUNTRY OF CITIZENSEIP RESIDENCE & 0 **NEW YORK NEW YORK** UNITED STATES OF AMERICA **CITIZENSHIP** 2. POST OFFICE ADDRESS STATE OF COUNTRY ZIP CODE POST OFFICE 382 CENTRAL PARK WEST, 11D **NEW YORK** NEW YORK 10025 **ADDRESS** LAST NAME FIRST NAME NUDCLE NAME **FULL NAME** FICHNER-RATHUS LOIS OF INVENTOR 2 STATE OR POREIGN COUNTRY COUNTRY OF CITIZENSELF RESIDENCE & 0 SHORT HILLS **NEW JERSEY** UNITED STATES OF AMERICA CITIZENSHIP 3. POST OFFICE ADDRESS ZIF CODE POST OFFICE 31 KNOLLWOOD ROAD SHORT HILLS **NEW JERSEY** 07078 **ADDRESS** LAST NAME FIRST NAME MIDDLE NAME **FULL NAME** OF INVENTOR 2 ary STATE OR POREIGN COUNTRY COUNTRY OF CITIZENSKIP RESIDENCE & 0 CITIZENSHIP 4. STATE OR COUNTRY POST OFFICE ADDRESS ZIF CODE POST OFFICE **ADDRESS** LAST NAME FIRST NAME MIDDLE NAME **FULL NAME** OF INVENTOR 2 STATE OR POREIGN COUNTRY COUNTRY OF CTITZENSKIP RESIDENCE & 0 CITIZENSHIP 5. POST OFFICE ADDRESS CITY STATE OR COUNTRY ZTP CODE POST OFFICE **ADDRESS** LAST NAME PIRST NAME MIDDLE NAME **FULL NAME** OF INVENTOR 2 TATE OF PORBION COUNTRY COUNTRY OF CTITZENSKIP att RESIDENCE & 0 CITIZENSHIP б. POST OFFICE ADDRESS STATE OR COUNTRY 27P CODE απ POST OFFICE **ADDRESS**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SONATURE OF INVENTOR 301	SIGNATURE OF INVENTOR 202	* for the thing - Latery		
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